

CHANNING (W.)

D. Hammond from the Author

OF THE MEDICAL PROFESSION, AND OF ITS PREPARATION.

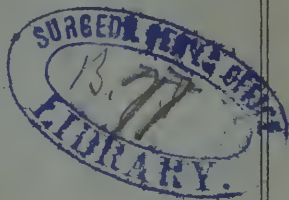
AN

INTRODUCTORY LECTURE,

READ BEFORE THE

MEDICAL CLASS OF HARVARD UNIVERSITY,

NOVEMBER 5, 1845.



BY WALTER CHANNING, M.D.

BOSTON :

DAVID CLAPP, JR., 184 WASHINGTON STREET.

Office of the Medical and Surgical Journal.

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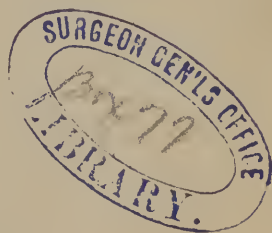
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TO THE MEDICAL CLASS ATTENDING THE LECTURES IN HARVARD
UNIVERSITY, 1845-6.

Gentlemen,

I dedicate the following Lecture with great pleasure
to you for whose benefit it was delivered, and remain

Your sincere friend, &c.

W. CHANNING.

Boston, Nov. 5, 1845.

LECTURE.

THE professors in turn deliver the Introductory Lecture to the courses given in this school. It becomes in time a matter of some difficulty and thought to settle upon a subject for the annual discourse. I must confess I felt somewhat troubled by my election, or rather present rotation, to this office. But very happily for me, just at the time, an advertisement in one of the daily papers removed that portion of my embarrassment which the choice of a subject involved. The following is the notice referred to.

"A PHYSICIAN

"Whose character, as a man and a practitioner, entitles him to respect and confidence, would, it is believed, find a pleasant and eligible situation, in a delightful country village, within a few miles of the sea-shore, where a vacancy has just occurred (one of the physicians having relinquished practice there). A middle-aged, married man, one who has had *experience* in his profession, is *well read*, *careful* rather than *scheming*, and of unquestioned *integrity*, and who can furnish good references, can ascertain further particulars on application at this office."

In this sentence, short as it is, lies wrapped up much for the thought of him who is about to make preparation for medical practice. The world over, the physician in some shape or other is advertised for. There is doubtless a reason for this. In Law and Divinity nothing of the kind prevails. The young clergyman is invited to settle, and the choice is determined by the sectarian views he may hold. The lawyer passes his examination, enters the bar, and takes his office in such place as he may be eligible to by his previous education. But the physician may be advertised for. He reads the advertisement, he asks himself how far his qualifications correspond with the requirements, passes a favorable judgment, and offers for the place. Sometimes, not only his predecessor's patients are in the market. His house and barn and land, his horse and sulky too, are included in the "good will," and so a demand is made upon his pocket as well as upon his mind. I have no information to offer in regard to the results of such demands, and of such supplies. We may infer

that there are conveniences in the arrangements, or it is not likely they would be so frequently made. In the notice placed at the head of this lecture, specific qualifications are given. The physician who would fill such a place must have already filled some other, and have done this very acceptably too, for he must have built up character there. He must have received confidence, too, it may be a large one. The age is prescribed. He must be married. A William Hunter, or a John Haighton, among the foremost men of their age as they were, such men would not have met the demand. He must have vigorous and well-cultivated moral and intellectual powers. He is to be well *read*; italicized; and *careful* rather than *scheming*, of unquestioned *integrity*, and is to bring vouchers for all these things, and some others.

And now for what has this medical paragon done so much for himself and for others in the view of the advertisement? And to what region is he to be *transported*, if he accept the call? I do not use the word *technically*, whither is he to be transported, should he accept the very modest and very flattering invitation? I quote the answer, for the advertisement has one. Where? "A delightful country village, within a few miles of the sea-shore, where a vacancy has recently occurred (one of the physicians having relinquished practice there)." You see there is no assurance whatever that he will ever get a patient in that "delightful village." O, no. He goes there to fight that he may reign. He who has recently "relinquished practice there" may have never had any, but has lived in that wide domain of hope, has enjoyed to satiety that *lucus a non lucendo-ism*, which are the occasional experience of the medical man in other "delightful villages within a few miles of the sea-shore"; and in the crowded city, too, though built upon "the beached verge of the salt flood." At least our *advertisee* will find competitors who it seems have too good a foot-hold voluntarily to quit, and who will hardly leave, simply because somebody else has been invited to enter upon the village practice, and into their own proper labors.

Let me, then, in view of the advertisement which is my subject, speak, First, of the Medical Profession.

Second, of its Preparation.

Let me speak of the Physician—of his office—of his duties—of his social value. He is in the market, let us see what he is worth.

Of the Medical Profession some judgment may be made, out of extra-professional opinions of physicians. Cicero says of them, that in nothing do men so nearly resemble the immortal gods as in giving health to men.

In his Life of Dr. Garth, Johnson says, "I believe every man has found in physicians great liberality and dignity of sentiment, very prompt effusions of beneficence, and willingness to exert a lucrative art, where there is no hope of lucre." They were palmy days of the profession when these men lived. In the age of the orator, medicine had not lost its connection with the popular faith. The hospital was a temple in which presided a god. The votive tablet contained the record of the patient's case, and this might be consulted by every body. The religion of the time was the handmaid of medicine, and the physician was held in reverence by the people. And so in some sort was it with him in the time of the British moralist. The medical history of that day shows that the profession was in great honor. The physician had an important place in society, in the literature and the science of the time. He had public and private duties to perform. He was a minister of the public health as well as a private practitioner. His education, his long apprenticeship in the first place before he could be admitted to the lesser places of the profession, his seven years noviciate in these before he could reach the highest, and then the severe examinations to which he was obliged to submit, before he could enter these—the whole which the age demanded of its public servants established a claim to the public confidence and respect which was generously allowed. And see to what individual excellence and greatness the requirements of the time led, or which they directly produced. When has medicine numbered so many, and such names, among its members as then? When was the profession held in deeper regard? That age has impressed itself upon the succeeding times. The impulse then given to the collateral sciences, as well as to medicine itself, has never ceased to declare itself in the succeeding history. Chemistry, botany, comparative anatomy, have each had a regard, and from the best minds too, which ^{has} ~~have~~ placed them in the highest ranks of intellectual interests, and much which has been done for each and to all of them in this way, has been done by physicians. We cannot look back to the time more particularly referred to without being struck with its moral and intellectual activity; and do we not come from our study with deep feelings of honor and gratitude that so much was then done for the medical profession, and for the race. We are no longer surprised at the personal respect, too, which medical men received—how much their opinions were valued, and how widely useful they made themselves. Johnson had a special reason for the elevated views he entertained for physicians. He was *the* man of his age. He exercised an extraordinary moral and intellectual power. He received a wide

homage. Our profession gave to him its very best care. He had the willing service of its ablest members. I say emphatically willing, and let me add, *free*, too. They literally gave him their time and their best skill. They felt honored as well as happy to minister in all love and honor to the physical infirmities of one who had given his life to his own time, to its truest interests, and whose labors and name they knew were to be the inheritance of ages long to come. Was it not to their great honor that for such a man they so cheerfully worked? I always think of Heberden as most worthy my respect, when I see him without "view to lucre" giving his noble endowments, his large skill, so freely, so cheerfully to such a man! I honor my profession that in its members it has cherished such noble sentiments, has manifested so noble a life.

While thinking of such facts in our professional history, and seeing in them its true character, the civil position of medical men, their relations to the state as showed by the public distinction it bestows on them has occurred to me. In foreign countries, where titles of distinction are given for distinguished public services, upon medical men, and the same is true of the greatest in literature and science, titles of the most inferior rank only are conferred, and as the social position they lead to, involves no expensive outlays for its support, grants of money or of lands never go with them. The highest rank bestowed by royalty in Great Britain on science and literature, is that of a Baronet. It is often only that of a Knight. On the Continent, it is that of a Baron, in France the lowest, in Germany so low that it is bestowed upon almost every body. I do not refer to this in the spirit of complaint. It certainly touches not us where the distinction is to have no title. But it is quite curious to observe the scale of estimation which prevails where titles are thought to be something. The highest title to which a subject can reach, is accessible to the military man. Nay more, he may be placed quite near to the princes of the blood royal, by the highest patent in the gift of the British constitution. The clergyman may and does become a Lord, a spiritual one indeed, but having quite marvellous physical or political functions. The lawyer too not only may become Lord Chancellor, an *ex officio* title appertaining to a certain judicial position, and service, but how often out of his profession are peers created, transmitting their rank and their power to their families. Seventy peerages have been created from the legal profession. Not only are such orders of the state ennobled, but they get from the power which ennobles them the means to support their high rank, and these means, namely money and lands, cannot be alienated for debt, or by will, but descend too with the title. How different all this

with literary and scientific men ! Newton, the light of his own age, and of all times, was made Knight only as if in ridicule of his great mission to the world. Davy had a barren sceptre put in his grasp, for he had no son to succeed to his poor nobility. Scott, who filled the world with his mind, and his fame—he who was not behind the chiefest of the apostles of a noble literature—Scott was honored with the meagre hand of a parsimonious royalty, and in the changes of fortune which a trade in mind involved, and into which he felt he was obliged to enter, more than his life half spent, he was left by Crown and nation, to begin life again, and to force his mind to accomplishments by which to pay his debts ; which labor at length broke down that which did it, and sent him to his grave. What a noble work was that ! How much more than a whole dynasty of kings ordinarily does ! Do you not rejoice that it is impossible to reward man for his best works ; and that the state which does the most in this regard, does little more than to pay some reverence, do some honor to itself !

A profession is for life. How rarely do men withdraw from a profession ? It is not uncommon to find those who have passed middle life or more, in other modes of using the mind or the body, or both—it is not rare to find such men who have made themselves rich, leaving their customary mode of life, and living, as it is called, on their means. Not so with the professional man, especially the physician. He stands steadily by that which in an earlier day stood by him. It has been to him the means of moral and intellectual growth. It has given to him consideration, a fair fame, honorable and honored place among men. It has been to him, too, the means of doing good, much good to others. Men have come to rely upon him. Moral and deep sympathies have been established. They have passed from the parent to the child. They have been the legacies, the transmitted memories of generations, and have bound hearts and minds together by ties which infirmity or death only can sunder. My observation of medical men extends to nearly forty years. I do not know an instance of a man whose whole character and position have been the products of this profession who has left his post. I was a member of a committee who went to Salem to invite the late Dr. Holyoke to meet his professional brethren of the State on his hundredth birth day, that they might pay to him personally the tribute of their large honor for his professional excellence—their deep reverence for his unspotted life—their love of such child-like simplicity, such surpassing moral beauty as were his. We found him in his study reading.

The work was a volume of the Transactions of the Royal Society of England. He received us with the gentle courtesy of an earlier age. He accepted the invitation, hardly thinking it worth while for one man, and he so old, to give so many so much trouble ; but expressing himself as much gratified by what had been so kindly offered. I said to him that we had interrupted his reading, and asked him what work it was which was so much interesting him. I shall never forget his answer. He named the work and went on. "O sir," said he, "my memory holds so little of what I now read, and that for so short a time, that books of this day are constantly new to me. Scott's stories are always new." But of early study and thought his mind retained most vivid impressions. What, however, is most relative to my present point is this. Dr. Holyoke still belonged to his profession, and after his 100th year made a consultation visit with a friend from whom I had the anecdote. I once said to Dr. Holbrook, of Milton, then an old man, "Well, sir, I find you still at work." "O yes," said he, "I have been in the mills fifty years, and shall never get out of them."

Now look where you will, this is the universal language of the profession. Look abroad. Did Dupuytren, did Cooper, Sir Astley, did any of the great lights of their own day, and which are to illuminate all succeeding times, did they withdraw that light when it was most brilliant, and put under a bushel what was for the illumination not only of their own house, but of the world? No. They were, without a metaphor, cities set on hills, which could not be hid. They were of immense wealth. They had fame enough and to spare. But they worked on. They were unto death true to that profession under whose generous influences they had become great. Nothing could win them from that great and early love. Come home, and the same truth is told. Men here, too, give to their profession, and to their age, their time and their mind. Johnson said, a man, an old man especially, should keep his friendships in repair. A professional man does this without an effort. His works follow him in his whole career, however long, and honor him in his whole course. I have heard physicians, and those of much eminence too, say, that after such an age, or under such and such circumstances, they would retire from business. And an effort to do so has been sometimes made. But a lingering look has been cast behind. The story of the tallow chandler has been repeated in them. He had retired from business with a large fortune, but he had made his successor promise to send for him every "melting day." He could not deny to himself the exquisite pleasure which that day for so many years had given him, and from which all

men out of his profession would have shrunk with disgust. The physician does not forget "melting days."

But a profession is not only *for life*. *It is a life*. This is a fact in its history which should be brought with most distinctness before his mind who thinks whether or no he will enter upon its study, or has already done so. What do I mean when I say a profession is a life? What is a man? Terrence sees in him the incarnation of humanity. *Homo sum nihil humani a me alienum puto*. This should be the physician's motto. Man to him is the embodiment of the moral nature, with the underlying reason, the living conscience, and the directing will. He sees in him too the intellect, the understanding power, by which facts and relations are known, whose province is science in the widest acceptation of the word — which ^{he} sees in man a creator, the poet, one who pretends to solve the problem of the material universe, and enters into the deeper mysteries of the spiritual being. Now look on man as we may, in the study and application of a profession his whole nature is in constant requisition. Everything to the physician has regard to his calling. And what his profession makes him re-acts upon everything else. Medicine in its immediate use applies to the individual. It is that man, that woman, that child, to whom it offers its daily aid, and for whose particular well being it hourly seeks to provide. But besides this individual office, it is no less directly concerned for and with masses of men, communities, society. The public health is its care, and so is the prolongation of life. It looks into, nay it inquires deeply into that or those things which reach in their morbid influences to the masses of men. The sanitary condition of populous districts is its care. Governments come to it for light, and for help, when the pestilence is upon the people, and cities are wasted, and whole nations are well nigh made desolate. Not only is the physical the domain of medicine. It takes care of the mind. It studies what there is in social and political institutions which reaches to and checks the growth of man's highest nature. All questions of morals, of religion, of politics belong to it. It looks at labor, the noblest fact declared by human energy, medicine looks at labor, man's work, and studies how it shall best conduce to moral and intellectual progress—when it begins to check this, and what are all its agencies in regard to physical health. Look at the late reports in England respecting labor in all its details, reports made to committees of Parliament under the solemn sanction of oaths, and learn what are the bearings of our profession upon the most important social and political interests. So too does medicine study what is poverty, its causes, its whole effects upon man and upon

society, and declares its discoveries for the benefit of the people. How much has it done in one of its departments for agriculture? In our own day, chemistry, the peculiar study of the physician, is revolutionizing this widest field of human industry, and bringing into every-day operation principles which shall be for the highest benefit of nations. It were easy to extend the inquiry and to show how comprehensive is medicine, how truly is a profession a life.

I had just closed this paragraph when I met with the following illustration of the sometimes silent but constant agency of medical inquiry in benefiting communities. In England, opposite Liverpool, a new and great city is in rapid progress. Ten years ago it contained 15,000 people, in ten more it will have 100,000. I copy a paragraph or two which bears upon my proposition. "We feel the greatest pleasure in stating," says the writer, "that, following the improved sanitary views of the last few years, they have made it one of their first cares to establish a 'park,' meaning thereby an open piece of ornamented ground for the future inhabitants of the city." * * * * "The space to be operated on was 160 acres. Sixty being set apart for building purposes, there remain 120 to be laid out in shrubberies, walks, and drives, for the enjoyment of the public forever." Says the writer, "We were delighted with what we saw here; but the satisfaction of the eye is nothing in such a case; the point really to be rejoiced in is that the ideas of men are now so far advanced with respect to the essentials of public health and conveniency, that, in preparing a new city, a park for the use of the inhabitants should have been among the first things provided for." In this same city houses for the working classes are in preparation, each having three rooms, gas and water, for £5 or about \$25 a year. Burying grounds are to be out of the city; as are slaughter houses. Everything shows in the building of this new, this pattern city, how rapid has been the progress of our profession in most important directions, preventions of disease—so making itself less and less important in the popular regard, by its wisest applications.

I know that much that has now been said may meet objections. We are told that he who devotes himself to many interests will never have wide success in any. A professional man must stick to his profession. *Ne sutor ultra crepidam*, &c. There is truth in this, but not all truth. No profession is one study. Medicine of all others is not. It admits of, nay it demands almost an infinite variety of mental activity. Look at its lights, its great and honored men, and see how in their lives they illustrated the quotation from Terrence. Haller, a high priest in the vast temple of science, was hardly less distinguished for his physiological

works, than for his moral, and literary, and philanthropic labors. Hartley was a physician, and who has done more to solve that deepest mystery, the nature of Man. I remember being much struck with an illustration of the doctrine now under notice, in the case of Dr. Brown, of Edinburgh, the successor of Dugald Stewart in the chair of ethical and intellectual philosophy in the University. I saw him as the daily practitioner of medicine, as faithful to its duties as if he had never done anything else. And look at that other, of the same name, Sir Thomas Browne, who left us a work on the Religion of the profession, which placed him among the chiefest writers of the Augustan age of English literature. I might easily multiply instances. I was once speaking upon this subject, for it has long occupied my thoughts—I was speaking concerning it with a professional, a medical man for whom I have sincere regard, and who is not without the public confidence. He thought a physician should be nothing but a medical practitioner, a daily visiter of the sick. “My party,” said he, “settles the question for me of politics and the candidates for my vote. My clergyman does the same thing for my religion. I do nothing but practise, and my sole thought is how that may be best done.” Now if there be radical comprehensiveness, here is an instance of radical exclusiveness. What is the natural, I do not say necessary, tendency, of such views of professional duty, or life? Is it not daily to contract more and more the sphere of intellectual vision, until nothing will be seen that is not in nearest proximity to the mind, until practical professional life falls into that melancholy routine which looks for nothing better, since it can tolerate no change?

I have sometimes thought that the want of intellectual activity, noticed by some, in men of mechanical occupations, might be explained by their devotion to some one mechanic art. How little occasion for thought, how little for conversation, in the every-day pursuit of some one labor. Perfection is soon reached. The education is completed when the apprenticeship is over, and then, for life, what demand on the individual remains but a certain amount of physical power put forth in the same direction, with a settled amount of intellectual effort, and a volition so slight as scarcely to be noticed. If we look for exceptions, such as are furnished by such men as James Brindley, James Ferguson, and James Watt, we find even these men devoted to the business or trade with which they began life—Watt developing the powers of steam, Ferguson making important discoveries in mechanics, and Brindley doing the same thing in regard to the mechanical uses of water. And finally, we meet with these very persons taking their honored place in history along with that

noble army of self-taught men who fill the chapter entitled the "Pursuit of Knowledge under Difficulties."

Sometimes the profession has been regarded as a luxury, and fashion even has not unfrequently settled the question of individual reputation. Said Lady B. to Lord B. one morning, "the nurse tells me that the infant has had a bad night, and refuses the breast." "Send then for Sir H. H. my dear. By the way, A, B, C, D, E, and F, will dine with me to-day. Tell Thomas to be sure to get a salmon. The Doctor likes salmon, ask him." "But, my dear, suppose there is a division to-night, and a call of the House, what can I do with this dinner party, and a child so ill?" "Why Sir H. H. will be here, and so the child is cared for, you know, and then, I will put him in my place at the table, and if they go when I am called, why I save my champagne, you know." Here is the luxury of the profession. In itself how important is its office, for it takes all the responsibility; and for collateral capital, at a pinch, how much may not be made out of it. But it was called fashionable, or it was said that the physician may be amenable to this power in society. Abroad this is quite remarkable. By or through fashion, men of not remarkable powers or attainments, at least men who have done comparatively but little to promote the true progress of medicine, reach to the highest present fame, and distance all their competitors. The extremes of manner, of address, of personal antagonisms, have determined the question of celebrity. Sometimes a coarse exterior and very rough manner have carried the point, while at others, the opposite have been in the ascendant, or what is more curious, men have lived at the same time and in the same city, as opposite to each other as possible, who have just divided the great or fashionable world between them, leaving their cotemporaries to stare at such similarity of effect, from such diverse causes. I could give illustrations of this in the earlier medical history. They belong, too, to our own day. A London physician has lately died who belonged to the class of high manners and high fashion, and, said one of his patients in a most extraordinary and extravagant expression of regard for him, I would have sooner died under the treatment of Sir Harry, than to have recovered in any other medical man's hands. There is at this moment a practitioner in London, not known hardly as having done anything for medical science, or literature, who has been for some time, and still is, at the very head of his profession, filled as it is with most distinguished men, and who has a business so crowded as hardly to leave him breathing time. Turn from this to such men as Sir Charles Bell, knighted as he was, as a reward for his noble works for his calling, but who died a pauper, living on public

charity, and whose family would now be beggared by its discontinuance. Was not C. Bell a faithful cultivator of a field worthy such culture? Did not his earlier works on Anatomy and Surgery, and his great and distinguishing one on the Nervous System, lying as it does at the very foundation of a true pathology—did not his splendid work on the Anatomy of Expression, and that greater one the Bridgewater Treatise—did not, I ask, all these, and other unnamed works, speak daily to the fidelity of Charles Bell to his profession, and claim for him so much of public favor as would have saved him from the pension list? There are causes behind, and which lie deeper than the fidelity adverted to—than the large endowment, and its laborious cultivation—there are causes besides these which often do much to determine present professional success. I would inquire for these, were I sure of getting an answer that would avail the student anything. They are doubtless in the man, quite as strongly marked as in the society in which he lives. He may be wholly unconscious of their possession, and wonder at his own success. They may be such as another might imitate, could he discover them. They may be such as men should, and true men would shrink from, as from moral pollution!

There is a moral quality of the profession to which I will for a moment allude. I mean its *Cheerfulness*. Physicians are cheerful men. How explained? The moral faculties are constantly in healthful activity, and the same is true of the mental. A physician is not using his mind directly, and constantly, in open competition with his brethren, as is the merchant. He is not in the market, and bringing into hourly use that sagacity which shall result in the best bargain. He is not as the lawyer daily confronting others, and in the stern conflict of great argument laboring for his client, and most effectually doing so by the temporary destruction of those opposed to him, and the certain and continued destruction of their client. The medical profession is indeed a warfare. It daily fights a great battle. But it does not contend for moral or intellectual victory. There is no money at stake. The physician's greatest success may bring with it the least pecuniary reward. His success has no necessary relation with money, or with fame. Suffering, exquisite pain, is in his path, and it is his office to remove it. Death is before him, and it is his mission to avert it. He sees life in all its aspects, its darkest and its brightest. Here is kindness which never faileth. It sits by that bedside by night, and by day, and with an angel's spirit ministers to that agonized frame which tosses there. Here is equal suffering, a deeper misery, and the tender mercies of those who minister to it, are only cruel.

The profession is in the public and private confidence after a manner in which no other one can be. Delinquency in all its forms declares itself to the physician with "miraculous organs." Now how active is that soul which has its life in such duties. How healthful is that activity which has for its great occasion the removal of moral and physical disease and misery. How cheerful must be that mind which has such duties, and which are performed with an undying faith in their own success. And success is their result. Recovery from disease is the rule everywhere. Death is the exception. The student of medicine enters upon this professional life because of the truth of these propositions. He lives in, and for, their verification. The profession is cheerful because it is healthful. Its longevity does not equal that of some other modes of life, but it is still great. Its health is the direct product of its physical exertion, its exercise. No matter how irregular be the physician's habits. He may hardly have time for eating, and none for sleeping. He may be exposed to all extremes of temperature, be drowned with the rain, or choked with the dust. There he is abroad, facing the whole brunt of it, and his escape from what such exposure might bring to other men, is the consequence of the fearlessness of his life, of habit, of cheerful submission to the contingent, nay, the inevitable. Physicians are often asked, when the most malignant epidemics exist, and they are in the very midst and pressure of them night and day—physicians are asked how they escape in the general death? Is it not because of the fearless, firm, nay cheerful minds and hearts which they carry with them into the sick man's chamber; and because they go there on the highest mission which is given to man? Is it not to the physical and moral health, which the whole preparation for the profession, and its whole duties bring with them, that the alleged exemption may be ascribed? Men have fled from the field of danger. Physicians fled from the Asiatic cholera, that dreadful disease, which Magendie said began with death. But such men wore the professional armor lightly. They had not its spirit. They quailed before the enemy. They were not of us. They might have died, had they not fled. Is not the physician cheerful, too, because he is a temperate man, finding his pleasurable excitement in permanent stimulants, a good conscience and a noble work? Is he not cheerful, because he is not a speculator, in the business use of the word, and has no fear of a fall in the funds, or in prices? Is he not cheerful because he has too much occupation with the depressed and the morbid in others, to give much time or thought to what he might hunt up in himself?

However it may be in regard to this quality of cheerfulness in the

profession, do not let it be for a moment imagined by the student that medicine is without its trials and its sacrifices. It has both. Its confidence brings with it pain as often as pleasure. Human nature is revealed to the physician in and by sickness, in its weakness as well as in its strength. The heart here discovers its bitterness as well as its joy, the mind its weakness as well as its strength. Delinquency, the gravest moral delinquency is among the revelations of medicine. At times they are the conditions, the sole conditions, of a true treatment of disease. But let me say here, that whatever our profession discovers to us of the kind referred to, it comes to us as a *medical* fact which is never to be disclosed. Except for the defence of justice, in a court of law, never let the student suppose for a moment that what he is to be professionally made acquainted with, is to be uttered by him, however confidential he may design his disclosures to be. He is with his patient, and before the public, a physician only. His mission is to treat disease, and to know what disease is, he must be in possession of all its causes. This is the limit of his professional relations, and let him, as he loves justice, honor, and a true fame, never, never in thought even, pass beyond it. The limitations of our responsibility, if such we have, will be considered in that part of my lectures on Medical Jurisprudence which includes medical ethics.

But the confidence of medicine does not contain all the trials of the physician. His profession is a life. It has not term time and vacation, alternating in fixed order, as has the Law. It is not with it as with the mercantile life, "spring business, and fall business." And it has not the privilege of the clerical calling. "The Sunday dawns no sabbath day" to the physician. He is a minute man in every sense of the word. "Be good enough," said one to me one day, "just to sleep with one eye open, we shall want you soon, and you know there will then be no time to lose." "The doctor says he cannot come!" exclaims another, "he is eating dinner! What business has a physician with dinner! Send for somebody else." "Confound that bell!" exclaimed a friend one day, "I believe it has at last learnt to ring of its own accord, and sets to always just as I get home!" Matthew Baillie, physician extraordinary to the King, and author of the *Morbid Anatomy*, had at the close of a most disagreeable winter's day, got home from an unusually fatiguing day's work, and was in the comfortable process of warming himself before a most genial fire, preparatory to his dinner. The London dinner hour was then six. Everything went well, and the doctor had experience of one of the pleasures of the profession, complete rest and true comfort

after hard work. It was a "fearful joy," for in the midst and pressure of it, the street door bell rang, and the servant entered, saying, in his wonted quiet way, that Mr. Somebody, residing in a distant and obscure street, wished the doctor to visit him immediately. The very manner of giving the message seemed offensive. "Tell him I won't," was the answer of Baillie. The servant shut the door gently, and was slowly on the way to give the answer. He had gone but a step, when the bell-rope was in the doctor's hand—it was pulled "with a will," I assure you, and the servant retraced his steps. Dr. Baillie met him at the door. "Tell John to put the horses to, and drive the carriage round." Now I know not how Dr. Baillie became king's physician, and there may be differences of opinion touching the value of the *Morbid Anatomy*, but there can be but one opinion held of his character, as illustrated by this anecdote. We feel that he was a man, a noble, a great man, and instinctively pay to him the homage of our "large honor," and love the profession which by its stern discipline, its daily trials, made such a man. Now Baillie had known the trials referred to, in their diverse forms. Allied to the Hunters, and to Sir Everard Home as he was, and having an excellent mind, and that faithfully cultivated, it was not till he was between 40 and 50 that a just estimate of him had been made. His business was small till after that time. But you see the heart-sickness of hope deferred, if he ever felt it, had not soured him. He did not come into full practice, public, nay regal confidence, bringing with him a cherished sentiment of ill-will toward society, or a soured temper, out of that earlier neglect. No. He came with his moral and intellectual natures not in antagonism, but in perfect harmony. The physical might in its weariness and weakness disturb the balance, as in that answer to the poor man's messenger. But it was only for a moment. And with what exalted dignity, with what celestial brightness, may I not say? did the man, the divine in him, in a moment declare itself! It were easy to cite instances of a like conquest of the profession where there were many circumstances to produce very different results. I have preferred to find an illustration of one form of sacrifice which it demands, in a fact out of a distinguished and great life.

But trials and sacrifices are not only or principally physical in their nature, as are those just hinted at. The mind and the heart, too, have now and then stern demands made upon them, and which they are forced to meet.

A topic remains, which I approach with misgiving, but which has too near a bearing on our subject to be passed by without notice. I refer to

the present state of the profession in regard to the public estimation of it. By some this is not thought to be what it once was. We are told that the ancient reverence in which medicine was held, is decayed, and that the public confidence in it is lessened. Whence this opinion? What are its causes? If it be in the position of the profession at the present day, that the altered sentiment has place, what has produced the state?

The causes may be general, and special. In the first, we find the time in which we live. It is an age of thought, of speculation, of dissatisfaction with the present, of change. It is an age of reform, a word unmusical to many ears. The power of mere, naked authority, quails in such an age, to the demand made on all sides that it make clear its claim to respect, to defend itself against the aspiration, the hope for better things. The past is summoned, is made to take its place by the side of the present, and to show cause why its authority may not be questioned, and abrogated. We may see the illustration and proof of the ground here taken, in the diminished authority of the church, as declared by the failing power of creeds over the general mind. It is very striking in legislation, as showed in the altered and milder character of law. A professional proof of this may be found in the view taken of Sir James Graham's "Medical Bill," which has been so long so burdensome to the British Parliament, and which proposes to increase the penalties for irregular practice, and to give back to medicine its old authority in the state, by the power of law. One of the most conservative Journals in Great Britain, the London Quarterly Review, open before me, has a sentence which is conclusive concerning this matter of increasing penalties against irregular medical practice. It occurs in a review of Sir James Graham's Bill. "It is needless to discuss the question whether the legislature ought to interfere on such occasions, when it must be plain to every one that it is impossible for them to do so, and that the most stringent statute having this object in view would be from the beginning a mere dead letter. Napoleon's Berlin and Milan decrees could not prevent English manufactures from finding their way to the Continent; and the instinct which leads us to struggle for the preservation of life is a more powerful agent than the desire to have the best calico and cutlery."

A society in London, deeply interested in the suppression of the slave trade, has recently petitioned Parliament to have the naval force withdrawn from the African coast, as it has been ascertained that its presence increases the dexterity and vigilance of the slaver, and adds more power and success to the piracy.

Within a very few years the Medical Society of this State surrendered

the law which in intended kindness to the profession gave to its members exclusive power to collect its debts for professional services. In these and similar facts which distinguish the age, I look for some of the causes which, as has been alleged, may have diminished the public authority of medicine. But others have acted more directly. The effort has of late been to make medicine popular, to unfold its mysteries, and unconsciously to make every man, woman, and child too, his, her, or its own doctor. In this work, medical men, educated physicians, have entered as freely almost as has the more interested quack. And how? Look at the popular education. The schools are filled with books on anatomy, physiology, hygiene, physical education, chemistry, botany, and what not, prepared with great care to teach these several branches of medicine. We have popular lecturers, men and women, who give regular courses on anatomy, and physiology, and means of preserving health. Yes, we have it advertised in large letters, on large bills, that Dr. — will lecture on such evenings to *men alone* on matters which it behoves them to be anatomically, physiologically, and pathologically informed about—and on such evenings to *women alone* on kindred matters of interest to them. The female lecturers judiciously confine themselves to the peculiarities of their own sex.

Now look about fifty years back. See how these matters then stood. We had indeed Willich and Buchan, but they were not then parlor books. We had anatomical lectures in the medical colleges, but we did not make anatomy a tea-table topic. To wear a false tooth was made a question of morality, since it was considered a mode of obtaining goods under false pretences. And dyspepsia was eschewed from the common talk, as it involved particulars which might not be discussed to ears polite. Now teeth are talked about, as is the weather. Dentists have their friends, almost their parties. Men have bowels, loose, or costive, and women have *spines of the back*. Is it at all to be wondered at that medicine, whose mysteries were once so sacred as to dwell in temples, whose words were oracles, and whose deeds were of the gods, and which at a later date was so far removed from the public stare—is it to be wondered at that medicine should have lost something of its earlier veneration, now that it is taught in the nursery, and lies so naked upon the very surface of society? If there be truth in all this, what is the duty of the student in regard to it? His duty here, as in regard to the whole profession, is to make perfect preparation for what he will be called on to do; and in regard to the public, always to labor for its highest present good, and to secure to the utmost of his power what good he may now do, to both his profession, and to

the public, for all succeeding times. Never let him condescend to minister to a depraved public taste ; but ever seek the true dignity of his calling by contributing to its certain advancement.

Other causes have wrought to a like end with those named, and they deserve more special notice.

First, the popular literature of the profession. What is this? It consists in works on the diseases of children, of females, of mothers, on the management of consumption, &c. They are written by physicians, have glossaries for explaining medical terms, descriptions or definitions of diseases, with recipes in English to suit. These works profess to be addressed to the profession as well as to the public. To the former they are utterly useless if the profession be duly educated. To the latter they must be worse than useless, seeing that the public in this regard, and for such purpose, is not educated at all. These works are designed to show what should be done in slight diseases, or in the beginnings of the graver, and which beginnings are for the most part, as the physician knows, but the incipient movements of the gravest. And to whom are they to show this? To mothers, and nursery maids, since the man of the house has nothing to do with this domestic literature, unless to take a prescription now and then from the powers above stairs. In other words, these popular works suppose that the persons referred to understand the distinction between diseases, the *diagnosis* ; and the disease given, they have only to turn to the treatment. Nothing to my mind is more absurd and injurious than all this. The physician is to be sent for if things grow worse. The parties do not commonly know if this be the case ; and if they do, they will not probably send for the physician till his office is useless, or if not, not until the case has become so complicated by what has been done, that it is by no means easy to say what may be safely done next..

I would not exaggerate the trouble or the harm produced by the books in question. I think it unworthy the profession, and unjust to the public, to scatter in its paths books which cannot be understood by it, and which in place of producing knowledge, is only giving injurious activity to ignorance. There is less to my mind to complain of in the veriest works of the most unprincipled quackery, than in these which come from the regular faculty. They often place it below the most unqualified empiricism. What can be more annoying than to be met at the chamber door of a patient by a friend, a female friend, with book in hand, welcoming us by reading the history of the disease, and then telling us of remedies and results, adding that calomel and bleeding were now necessary, but

she really was unwilling to meddle with mineral poisons, or with edged tools. He who may *consult* with such a practitioner violates a law of the Medical Society of this State, and exposes himself to its severest penalties.

Turn now from these popular lights, and very popular medical guides, to another portion of popular medical history, that we may know more of the causes which may have affected the good name of medicine, or given rise to the opinion under consideration. I refer to the daily forthcoming new doctrines of disease, and the no less new methods for their treatment. Why do men, and women, and children, die now-a-days? The hydropathist tells you the physician kills them. The homœopathist, that it is allopathy which daily slays its thousands. The mesmeric seer ascribes the bill of mortality to neglect of mesmeric medicines—and the Anglo-Saxon *medicine-man*, with his white skin, says faith only is wanted in the Great Spirit. The world is full of sure means of an earthly immortality, and still men die. I refer here to a portion of the medical history of the day, and if measured by numbers, an important one. These are among the modern contrivances by which men seek to live themselves, and to make live others. And who sustain them in their Legion numbers? I answer, men for whose judgment, in other matters, we have respect. They have advocates, women as well as men, of rank, of wealth, and of talent. I remember when there was a little secrecy in this matter. But none exists now; and men and their large connections, give in their allegiance to some new system. They have for it the strong attachment which deserters from the old, and advocates for the new, generally have. They are jealous for their system, and the regular should be cautious lest in questioning their faith, he spring a mine which may bury himself. Elliotson, so widely known for his writings, a professor in the London University, and a hospital physician of established character—Elliotson sacrificed both, and more, to his conversion to mesmerism. It was nothing to prove to him that his mesmeric subjects had wholly cheated him, that they were utterly abandoned in character, and so wholly unworthy his confidence. He kept the faith. How easy were it to furnish here illustrations of the power of hydropathy and of homœopathy over minds which in regard to other subjects claim our respect, and from whom we cannot withhold it.

How have these things diminished public confidence in the profession?

First, by withdrawing from it the active patronage of men whose favor was to be desired. This, however, I regard as the least of the agencies which have injuriously reached our profession. I think indirect influences have done much more. Among these I rank the manner in which new doc-

trines have been met by medical men, and especially that in which it has been proposed to treat their professional advocates. I have already referred to what is now attempted to be done in England by the Medical Bill before Parliament. It is proposed in that Bill to prevent irregular practice by law. The same has been recently done in some States at home. And what I think still more injudicious, physicians have been expelled from medical societies because they have adopted some of the new methods of practice. The followers of Hahnemann have in some cases been so treated. I have no sympathy with this doctrine; and still I would not deny professional fellowship to those who have such sympathy, who for years have stood with respect in the medical ranks, and who have left them for what they believe either better for themselves, or for the public, or for both. I am free to say, however, that I think that he who has made a copartnership of the old system with the new, and who leaves it with sick men, women and children, to determine by which mode to be treated, has done that which demands the utter neglect, if not the contempt, of the profession.

And how have these new doctrines affected the profession through those who remain faithful to it? The opposition which they encounter increases the interest of their friends in their defence. They consider it an interference with their right of judgment in matters which most nearly concern themselves. The early professional teaching of the public above referred to, the professional class, and other popular books, have made them judges, and they will use their knowledge. The new method is so simple that a child may understand it. And the medicines in some cases are so minute in dose that they can do no harm. Their virtue consists in the character of their agency, this being as little felt by the sick, as by the drugs themselves. The domain of the transcendental belongs to the new doctrine, and he who has adopted it, has been, by that act, made free of that limitless republic. What now can professional opposition to all this do but strengthen its power? It brings itself into comparison with it, and where the public interest enters into the judgment, it is not difficult to see to which side it will turn.

A question arises, should not the profession examine pretensions which are at all sanctioned by the time through which they have lived, or by the numbers and characters of those who have supported or do support them? Is it not due to the public, that those who have long had its entire confidence should so far guard its most important interests as to give time and thought, deep thought, to that which threatens to disturb it? May there not be some truth in the new? Is it wise to believe, and prac-

tically to say, that there is nothing more to learn concerning medicine? Has any one of the new methods been examined on its merits? Has it not been treated on its earliest promulgation, with contempt, as having no merits at all?

There is another fact in the history of irregular practice, quackery so called, with which the student should early be acquainted, as explaining or accounting for some of its power. It has been frequently resorted to when the regular practice has withdrawn itself, or declared that it could do no more. And what is true in some such cases of irregular practice, the so judged incurable have sometimes recovered. The expediency of an unqualified prognosis has been questioned. Said a distinguished medical lecturer once, "When I am asked, in seemingly desperate cases, what my opinion concerning results is, I answer that I have seen people apparently worse, recover; and those who seemed less ill, die." He never forsook the sick nor dying. Laennec and others had not given then their cases of recovery from consumption, but he sought even to cure consumption. This medical faith in that professor secured to him the confidence of the sick, and so all that the mind can do towards cure was on his side.

I have met with a passage in a work, out of the profession indeed, but which bears so directly on our subject, that I am induced to transcribe it here. It is of great value to the student.

"We have no inclination, and certainly we have no inducement, to under-estimate the importance and usefulness of the medical profession. We know that through its agency life is prolonged, bodily sufferings are mitigated, mental anxieties are removed, and that the benefits which it confers are not confined to the individuals principally concerned, but that they often extend to whole families who are dependent on them for their worldly prosperity and happiness. We know that there is scarcely one hour in the day in which a judicious and well-informed practitioner may not say with a safe conscience, 'I have done good to somebody.' Still the medical profession cannot do all that is expected or required. Sooner or later, and with every one among us, the time arrives when the best medical aid, as it regards the preservation of life, is good for nothing. It is true that, even under these circumstances, it may often diminish pain, or alleviate such bodily distress as is not improbably worse than pain: but not unfrequently even these objects are unattainable; and the most skilful and experienced person standing by the patient's bedside feels that his wand is broken, and that he has nothing left to offer but his sympathy and commiseration. But the desire of life is not necessarily extinguished even in the hour of death; or if it be so with the patient himself, it may

still linger with his family and friends. When the art of the regular practitioner can do no more, are we to be surprised that the promises of others should not be wholly disregarded? and that even the miserable chance afforded by the impostors of the day should be looked at with something like hope when no other chance is left? It may be said that to catch at such a straw as this can only end in disappointment; but the reflection that any plan, however in itself absurd, has not been tried, may cause disappointment also." London Quart. Review.

But whatever be the popular estimation of medicine, there is one fact in its history which challenges for it the highest public confidence. I refer to the progress which it has made within a few years, and which it is daily making. In this fact do we not find good cause for congratulation? By new modes of investigating disease, a better assurance of the truth of facts, their more strict and philosophical analysis, a wiser and wider observation, these and kindred agencies have distinguished our professional times, and contributed truly to the progress of medicine. The numerical method, which though by some is nothing but counting, and what more is it? has done excellent service. It has done something to determine the frequency, and character of disease as far as it is applicable, and made sure what was formerly so unsettled. A man who has any due sense of character must *count* now-a-days. It will not do for one to say he has cured consumption very frequently, in questionless cases. He must add up his numbers. He must tell us what the precise number is.

But the numerical method, counting as it is, demands much more than simple addition. You must know what you count, and you must furnish the proof that you are right. The medical witness must not only be of unquestioned veracity. He must have knowledge, exact knowledge, or his testimony will be worthless. His reports will have equal value with the story of the three black crows, which turned out no crows at all. The illustrious Louis, and his great predecessors and contemporaries, have established the paramount importance of diagnosis, or the distinction of diseases. Nay, he and they have extended their severe methods of investigation to the agency of particular medicines or remedial methods of treating disease. Bouillaud has told us exactly the number of cases of rheumatism in which he has used bloodletting. Its quantities, its immediate and remoter effects are given, and so we have learnt when and how it may be best resorted to. A very important result of the later methods has been the reduction of the types of disease, by finding in a single type the paternity of a whole pathological family. Philosophy delights

in the fewest causes for the explanation of its phenomena. Gravitation solves the problem of the motions of the universe. Medicine is daily approaching its highest philosophy ; and who knows but that it may, in its progress, make itself unnecessary, by disease being resolved into a unit, and its treatment into a single method. In another way has professional progress usefully affected the popular view of medicine. Less and less reliance is placed in the very active treatment, the heroic medicine of an earlier day. How much easier, it is asked, is disease treated—how little comparatively is done for it—won't you do more in this case ?—where is calomel ?—where is bleeding ? So questions come. But the physician pursues his plan. Disease is shorter. Suffering is less. Recovery is more certain. In our enumeration of causes which have relieved medicine of much of its popular mystery, increased longevity, the result of a better hygiene, and the diminution of malignant diseases or of their power to shorten life, should not be forgotten. I might here mention the diminished mortality from smallpox, and the great deduction from its whole morbid power by the substitution of vaccination. And so of syphilis. What change and improvement have been made in the treatment of this disease, and how much have its destructive agencies been controlled, and its injurious results been obviated ?

While the progress of the profession may, as alleged, for the time, have given power to that which opposes its interests, let it never be forgotten that the physician who deserves public confidence is now as sure of it as he ever was. If the public look for a more excellent way in a practice in which its own opinions are taken, its adhesion to such practice will be pretty sure to fall away when such opinion ceases to be cherished, or to be consulted. In other words, in the time of danger the highest authority will be demanded, and he or she who for a time has yielded to the fascinations of the new, will surely seek safety in the old, and the tried. The only power of our calling is in its true knowledge, and never in its history have the means of such knowledge been in fuller measure, or wiser operation. It is for the physician to secure the whole benefit of such power to the public, and to his profession. It is the paramount duty of the student to make such power his own.

I have thus spoken of medicine as a profession, as a life, as a profession for life. We have seen it having intimate connections with all the great interests of life. We have learnt what are its demands upon him who has devoted himself to its stern service. It demands the exertion of all his powers. It calls into exercise the whole moral, intellectual, and physical. I enumerate the last, since surgery is one of its departments, and,

as the word imports, is "handwork." It asks for the highest cultivation of the senses. The eye is its servant in observing external diseases, and with these all those changes, of expression and manner which come under its notice, the whole physiognomy of disease. The ear is called upon as the instrument for detecting diseases of the chest, the respiratory sounds in all their varieties, and those communicated by the heart. Touch, taste, and smell, are all in requisition.

Let it be remembered, then, by the student, that medicine is not a dogma, nor has it its reputation in an age, or in a name. It is, in its principles, the great, the sublime generalization of an infinite number and variety of facts, the observation and collection of which, beginning with the priest-physicians of Egypt, have been continued to us through the heroic medicine of Greece—by the votive tablets in the temples of Æsculapius—by the depository of all earlier learning, Arabia—by Rome—and through all the succeeding times. The principles of medicine are the inductions from every fact which its disciples have seen, studied and recorded. To us, this day, it is philosophical criticism, examining and propounding the character of all medical doctrine. It is philosophical classification, giving permanent place to, and establishing the relations of, all facts. It is scientific nomenclature, giving expression to them all. A man to have true influence in such a profession, must then have true knowledge. He must know many things, as well as the mass of men knows them. He must know some, are they not many? better than anybody else. A great man here, makes great, that to which he has given his heart, his hand, his mind. His labor becomes worthy of his whole power and being, by the transfusion into it of a noble spirit. It has then in it, emphatically, him whose it is. He is its present life, and its present honor; and in his own immortality, it becomes itself immortal.

Now in what consists preparation for such a profession? What is he to do who has this day begun its study, and who has devoted himself in that act to the highest service of man, who means to live in the present, and has in that purpose the prophecy of living in the ages to come? A German writer of wide fame has left a work on the "Vocation of the Scholar." What is the vocation, the calling, of the physician? I have answered the question, imperfectly indeed, in the views offered of the nature and demands of the profession, and shall proceed at once to speak of the preparation required of the student by its duties. I enter here upon no light work. Is it not the most important which can occupy the mind—how another mind shall be trained, or may train itself so as to bring out into full life its whole powers, and in doing so render the truest service to the race?

Says Locke, he who would obtain truth, must begin with the love of it. We profess to study, or to search for truth, in all intellectual and moral effort. Is there any pursuit which has for its object more important truth, and in which the difficulty to obtain it is greater, than medicine? Let him who has, or is about to devote himself to it, begin with a love for it. The preparation for its practice is in *time*, and in its *employment*. I do not ask here how much time it may be necessary for each one to devote to the study of medicine. I know not, and who does, certainly does he not who is making preparation for active life, how much time is demanded to make it perfect. And yet for a moment let us see what are the official arrangements in this matter. The length of time a student shall devote to this preparation varies in different countries, and in different parts of the same country. What answers very well in one State in this Union, will not answer in another. In one, if a student be a graduate in a college, two years of medical study is thought sufficient. In most, if not in all others, three years are required. But where this is the case, in some schools, if the student have attended two courses of lectures, though one course follows directly upon the other, he may be admitted long before the three years expire; and a President of a College once said to me, in a correspondence on this very subject, that he thought if a student could pass an examination after two years or more of study, he was quite as deserving of a degree as was he who required many years for the same preparation. Then, again, the length of lecture terms. This differs. In one school it is thirteen weeks, in another seventeen. The number of teachers greatly differs, in some being six, or even eight, in others three or four. In many schools professors are non-resident, but supply two or more schools in succession. In order to do this, the same professor gives two or three lectures a-day, sometimes two in successive hours, so that he does up his teaching in five or six weeks. He then examines the candidates for the degree in his department, and of course without any knowledge of their appearance in the others, he leaves a vote for or against, just as he appears in his own. Then again in regard to hospitals. In some schools they form a part, is it not almost the most important part, of preparation?—in others they form no part of it at all. Where they do, the pupil sees the sick with his own eyes—witnesses the mode of examining cases by skilful, able men—hears the order and kind of symptoms—knows what the treatment is, and sees the result. At the clinical lectures, both in surgery and in medicine, he is taught, thoroughly taught, disease in its immediate illustration, and if he have man in him, knows what his duty is, and performs it in this highest regard, he goes home, or into practical life, with true preparation for his du-

ties. Suppose he passes his years of study in a city where is a hospital, and diligently visits it. So much better is his preparation. So much better his claim to the public confidence and respect. See now, for you may, what is a medical education without such means of knowledge.

Medical Schools, however, do not only give authority to practice. Medical Societies do the same. These require three years of study, it may be. They prescribe a certain course of reading, the same for all, and demand a good moral character. But they demand no courses of lectures and no hospital attendance. Like the Schools they require satisfactory examinations. What a variety in requirement! How comparatively full, how positively deficient. Does not the question almost arise, if in such confusion, and so much imperfection, if true means of preparation exist at all?

Abroad much of the same thing exists. But the division of labor there, secures comparatively ample time for the separate study of each department. Surgery makes an independent study, though the principles of medicine make part, and its practice in many cases obtain. So does medicine, that being more exclusive, the physician never being acting surgeon. The division is deeper than this. The eyes, ears, toes, tendons and teeth, have special study. Midwifery in some sort exists alone. Now in such an arrangement, the time of study abroad, the apprenticeship, the hospital, lectures, apothecary's shop, &c., all go to make the student accomplished in his art. The examination is a severe one in all the colleges for degree, license or fellowship. And the chance is the public is well served. The general practitioner, so called in England, he who combines in himself many or all departments, has recently excited much public and legislative interest in regard to preparation and qualification, and the Bill in Parliament, before referred to, has these matters specially in view.

Now here we are, all of us, general practitioners. Our two, or at most three years study, which taking out sickness, vacations, amusements, may be reduced one third or more—with lectures or without—with hospital or with none—with old books, or with new—selected by the teacher, or not selected at all, or by the student himself—these constitute the variety of means of our preparation for entering a profession distinguished by the number of its departments, its diverse interests, its grave responsibilities. The subject occupies deeper regard every day, and every year. Abroad it is a topic of intense interest. In America men are constantly directing to it the attention of the profession. I have before me now a circular calling for a Convention of Physicians who shall take the sub-

ject of professional education into deep thought and propose measures of reform. We have seen how different are the requirements of different schools for the same degree, or license to practice. What is equally worthy notice is the fact that in every school each student is to be equally taught in the same time. The amount required therefore of each, can with justice be only that which he who has the least or an average power of acquisition, may learn, and so the highest knowledge may not be presented as an object of general or individual attainment. The examinations may not meet the whole difficulty of the case, and an inferior standard of qualification come to be established. The same remark, it may be said, applies to all other education, that of the university for instance. And so it does. But the demand for something higher in a profession is found in the fact that this is to fit a man for practical, responsible life. The college study is but a step on the way to that life. The public has a right to the highest qualification for the highest duties to which any of its members may devote themselves. Especially may it demand that the preparation shall be ample, if not perfect—that there shall be fitting knowledge acquired, if not all knowledge.

What shall be studied? I received a letter, a few days ago, asking what course of previous reading this school required for attendance on its lectures, and what course it prescribed during the lecture session. I was glad of the request, for it allows me to say something of a very important subject. What shall the student read? “Action, action, action,” said Demosthenes—and “Coke, Coke, Coke,” might have said one of the most distinguished jurists in English history, Lord Eldon, for in Action was the secret of true eloquence with the Greek orator, and Coke’s Commentaries on Lord Littleton was English law to Lord Chancellor Eldon. But again, what shall the medical student read? Blackmore, afterwards Sir Richard of that name, and a distinguished physician, and a very voluminous poet, being about to begin the study of physic, went to Sydenham one day, and having told him his purpose, asked him what book he had best read. “Don Quixotte,” answered the English Hippocrates. I do not stop here to ask what was there in the case of the applicant which led to the singular advice of Sydenham. I will at once point out such a method of study as observation, and such works as I have consulted, seem to me most strongly to recommend. I shall speak of *Time*, and of its *Employment*.

Let then the first 18 months be devoted to anatomy, human and comparative, chemistry, botany, mineralogy and geology. Let the student attend

lectures on the above branches, and these only. Let him visit a hospital, but devote his attention mainly to the observation of external diseases, surgical for instance, and diseases of the skin. While attending lectures let him dissect, and if possible become an assistant in the chemical laboratory. In these studies, especially in anatomy, lie the foundation of medicine. No physician can safely want the knowledge of them. No one can be an accomplished, thoroughly educated physician without them. They have been the studies of the most eminent physicians of all times. Chemistry has had its birth and growth in our profession. It has now its place among the exact sciences, and has its methods from the most profound and severe of them all. In its investigations of the organic, and the inorganic, it occupies the widest space in the field of science. It is full of interest. It has been loved with a devotion which no other branch of medicine has reached. No one can be a true scholar in this profession without a profound knowledge of its principles, and of their detailed practical applications. The other studies enumerated possess great interest. What of disease was named addresses the mind through the senses. These last acquire their best cultivation in this way, and also by those portions of natural history which were stated to be indispensable to the medical scholar, for themselves, and for the important aid which they bring to the studies and practice, of the whole profession.

I have omitted a study which may well come in, in the first 18 months, the History of Medicine. A student should early know something of the progress of that pursuit to which he has devoted his life. He learns how so much of time, so many ages, have been filled by his calling. He begins with his mind as much wanting in knowledge of the matter, as was the time in which it has been brought to light. He begins with the earliest, the fabulous periods of medicine. He travels through its ages, noting who have marked them, and by what they have distinguished them. He knows little or nothing of the doctrines, or of the practice which pass before him, for it is not literary history he is studying. And for his purpose he does not want such knowledge. He is filling his mind with chronological epochs, with distinguished names, and with individual mind and character. He is a witness of struggle, of defeat, of victory. Insensibly his own mind becomes awake and alive to the fact that the profession to which he has devoted his life is worthy the devotion. He insensibly takes his own place, or feels that he has one to take, in the long and venerable history of a noble art—of an art which has occupied great minds, undergone mighty revolutions, but which in every day of its being has had for its purpose true good to the race. Let him then study Le Clerc's History of Medicine, and Clifton's Hippocrates, the Life ;

Millar's *Disquisitions in Medical History*, Cabanis's *Revolutions in Medicine*, Friend's *History of Medicine*, and, latest and best, Kurt Sprengel's great work on the same, in nine volumes. I name those which are before me, and which will reward study, and make pleasant relaxations from severer studies.

The two following years will embrace the study in all branches of medicine. Two full courses of lectures, with dissections, daily visits to a large hospital, and diligent study of medicine in its varied literature. These two years form a most important time for the student. He must lay his back to the work. Everything else is to be subordinate, and used only as means to help him in his proper toil. It must be felt to be toil. He must read a great deal. He must forget a great deal to know much. A volume may give him but a single thought or fact for memory, but that fact will be a jewel. It has cost time, but it will last forever. Said Johnson to a young man who was vaunting himself on his wide reading and knowledge, "I have forgotten more than you ever knew." I once consulted a very aged physician, of much reputation in our community, on the treatment of an advanced case of fever. He went to his bookshelves, and from a high one took a volume which was Brocklesby on Fever. He turned rapidly its leaves, and in a minute or two put his finger on a particular paragraph, and bid me read it. I did so. It stated that in some moments of advanced fever an emetic was useful. Said my friend, "I have not opened that book before for forty years." Probably that one paragraph, which contained what he judged to be very important knowledge, was the only one which remained in his long memory. The student then must put it to his account to read a great deal. Let him from the beginning of his studies keep a *Common Place Book*, and into this let him make daily entries from books, and of such thoughts as specially occupy him in study. A vast help is this in the study of a science so full of fact and theory as ours. I may add, I hardly recollect a distinguished man in any field of literature or science, who has not faithfully availed himself of this means of acquiring and retaining at command, knowledge. Examinations with fellow students are always useful. I remember a public medical teacher of much eminence, in recommending such exercises, said, that a student could hardly be said to know what he had not in words, in language, communicated to another.

Three years and a half are now disposed of. Let the student now present himself for a degree. I think with this preparation, he may do so with some confidence. Having obtained his degree, let him go to Europe for a year, and study medicine in the vast practical school which is established there. I would advise him to give four months of the time

to a residence in a Lying-in Hospital, to which is attached wards for the diseases of women and of children. Dublin offers a most excellent field for such studies. Let the rest of the time be filled with such studies as are most favorably pursued abroad. Branches which were first studied at home, may be practically reviewed there, especially the collateral, while for the immediate, most ample opportunities exist. Permit me here to offer a ^{simple} ~~simple~~ caution, and which has application to the whole time of study. I think it is needed in the present day. Let the student be careful to avoid exclusive regard to particular diseases. Within a few years special attention has been directed to a few particular subjects. Laennec, Louis, and others, have given an interest, which may become paramount, to particular diseases. Fever and phthisis are among these. Great interest has come to be felt in the diagnosis of these affections, and it has reached great perfection. Their anatomical characters, as observed after death, have been so thoroughly studied, and their laws so accurately established, that perhaps little more is to be learned concerning them. But they form but a very small part of pathology, and to be too exclusively devoted to them will interfere with the acquisition of a vast amount of indispensable pathological knowledge. A physician should never be a devotee to specialities. He must not be a slave to the rare or to the few, however important. His pathway lies through disturbed functions, oftener, much oftener, than by the side, or through the regions, of grave lesions. He must be very apt to detect the former, and to relieve them, too, or he will not have a wide name, or a very full practice. Medicine must not be to him a "wonderful magazine." It may be, it will be, a book in which he may read "strange matters;" but he will find in it everywhere problems of the every-day, and the true, in which thousands are more or less deeply interested, and of which they will look to him for the practical solution. An exception to the rule suggested here, may be found in some strong predilection for some particular branch of the profession. Especially may such arise when the medical student is at work in Europe. Suppose now he have strong preference for some particular investigations, or to prepare himself for some particular branch of his profession, whether in medicine or surgery. Let him give time to such. He may do this without important sacrifice of other matters, and come home in his general preparation for professional duties, with a special knowledge which may stand him in excellent stead, and fit him for important special services to others.

And now let me ask what will be the product to the student of so much time, and of such faithful employment of it. I say *experience*. By

this word I mean here that intellectual perception, and that appropriation of what others have seen, thought, and recorded, as will make them his own, just as if he had witnessed them himself. His mind has been daily in sympathy with the minds of others. He has not only imbibed their spirit, but he has got their knowledge. They have been to him eyes, and he has through them had perfect vision. Barthez says somewhere, "that a man of strong judgment, and competent sagacity, may contribute much more to the real progress of a science of facts than he who is principally occupied with experiments." So our student in the wise use of his own mind upon what others present to it, may come to make a better use of knowledge than its teachers. The course of preparatory study, however, above indicated, will bring the student into direct contact with facts, with disease in its present living example, and so make him its witness. It will do this for him, when his mind is prepared for observation, and for reflection upon that which is presented to it, and so daily enable him to institute comparisons between that which he reads and sees, that authoritative inquest which is to result to him in truth, namely in all that truth to which he is at the time able to reach.

I may be asked if my subject does not demand some allusion to those moral qualities, and personal habits, which take so wide a part in the progress of a professional man, and if I have no detail of study to present? I say no. Vogel, a German writer who has written at much length on the education of the medical student, has devoted a long chapter to the first topic, and Young, in his *Medical Literature*, both before me, does the same for the latter. Young takes the future physician at 2 years of age, and prescribes specific studies for him till 18, and then teaches how in the three succeeding years he may be made into a physician, a surgeon, or a what not. But I have here no directions to offer. If I have succeeded in my attempt to show somewhat concerning the true nature of medicine, and in what consists preparation for it—if I have said that which will make the student faithful in his studies, have spoken for them, so to say, all his time—if I have done that which will bring into living action his intellectual and moral nature, and showed him what it is to be a man in his noble calling—if I have in any true sense done these things in the short hour we have now passed together, I shall not fear but there will come out of it a true revelation of what a man's conduct should be to secure for him all needed success. It may not make him a very rich man, but it will prevent his being a very poor one. It may make him a wise and a good man, and with such result, is it not the truest success? let him be content.

